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FOR INSTRUCTIONS, SEE BACK OF FORM FORM DISCLOSURE SUMMARY PAGE DR-2 DISCLOSURE (Rev. 07/2003) REPORT COMMITTEE NAME (Must be same as on Statement of Organization) IOC Davenport, Inc. For Office Use Only Comm. # IMPORTANT: indicate type of committee you are reporting for: 16 Longed in (1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate (5) County PAC (6) Baltot Isaue/Franchise Committee (7) County/City Cantral Committee Scanned (8)Support State of Candidates Computer CANDIDATE COMMITTEES ONLY: **Audited** Political Party Candidate Name District (if Senate or House) Office Saught SIGNATURE OF TREASURER (or person filing this report) Late filed reports are subject to possible civil and criminal penalties. SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE: October 19, 2003 I AM FILING A REPORT FOR AN/A (1) ELECTION /(2)NON-ELECTION YEAR. (report date) Indicate one 2 Local Committees, anter Date of Election ☐CHECK IF AMENDMENT TO REPORT DATED _ 11/05/02 County & Local Committees, enter County in which Election is held Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. Scott (You must continue to file reports until a Notice of Dissolution is filed.) STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end 0.00 of the last reporting period, or must be zero if this is first report filed.)\$ ADD TOTAL MONEY TAKEN IN THIS PERIOD 5,377.60 Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 0.00 Schedule F. Loans Received total (Attach Schedule F) 0.00 Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... (Schedule H applies to Candidates' Committees Only) 5,377.60 SUB-TOTAL\$ SUBTRACT TOTAL MONEY SPENT THIS PERIOD 5,377.60 Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).... 0.00 Schedule F: Loan Repayments total (Attach Schedule F)..... CASH ON HAND at the end of this reporting period (if final report, balance must 0.00 be zero) (Attach DR-3).....\$ 0.00 **UNPAID BILLS (From Schedule D - Attach Schedule D)......\$ 0.00 *IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)\$ 0.00 CANDIDATE COMMITTEES ONLY: CONSULTANT BREAKDOWN (Schedule G Attached?)

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

0.00

For Instructions, See Back of Form

Resemble

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on State	ement of Organization)
IOC Davenport, Inc.	

SCHEDULE	
Α	MONETARY
(Rev. 07/03)	RECEIPTS
CHECK THIS BOX IF AMENDING FORM	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN, A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
1/28/03	ID#	IOC Davenport, Inc. (General Funds) 200 E. Third Street Davenport, IA 52801		\$5,377.60	
	1D# CK#				
	1D#				
	CK#				
	CK#				
	ID# CK#				
	ID#				
	ID#				
	CK#				
	CK#				
	ID# CK#				
	ID#				
	CK#		SUB-TOTAL	5 3 7 7 60	

TOTAL (If last page of this schedule)

Page 1 of 1 (for Schedule A)

[&]quot;Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consenguinity (blood relatives) and affinity (relatives by marriage)—If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM



EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
В	MONETARY
(Rev. 07/03)	EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)	
IOC Davenport, Inc.	

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1/28/03	ID#	Citizens for Continuation of Benefits of Gaming in Scott County 203 W. Third Street	Pay portion of bills incurred by Citizens for Continuation of the Benefits of Gaming in Scott County	\$ 5,377.60
	ID#	Davenport, IA 52801		
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
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	CK#			
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	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
			SUB-TOTAL	\$ 5,377.60

TOTAL (If last page of this schedule)

5,377,60

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.6(3)(I).)

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